

11 CIV. 6335UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORKCharles Catling **DOC #** 2

(In the space above enter the full name(s) of the plaintiff(s).)

-against-

Superintendent Mark L. Bratt
Deputy Superintendent, Chappius
Commissioner Brian Fischer
Sergeant Malinowski
Officer J. Cappiella
Officer J. Haggard**COMPLAINT**

under the

Civil Rights Act, 42 U.S.C. § 1983
(Prisoner Complaint)Jury Trial: ☒ Yes ☐ No
(check one)

Kly

(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)

I. Parties in this complaint:

- A. List your name, identification number, and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff

Name

ID #

Current Institution

Address

Charles Catling
10A0061
Attica Correctional Facility
639 Exchange Street Attica New York
14011

- B. List all defendants' names, positions, places of employment, and the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.



Defendant No. 1 Name Mark A. Bratt Shield # _____
 Where Currently Employed Attica Correctional Facility
 Address 639 Exchange Street Attica new
York 14011

Defendant No. 2 Name Dss Chappins Shield # _____
 Where Currently Employed Attica Correctional Facility
 Address 639 Exchange Street Attica
New York 14011

Defendant No. 3 Name Brian Fischer Shield # _____
 Where Currently Employed The Harrison State Campus Building 2
 Address 1220 Washington Ave Albany new
York 12226-2050

Defendant No. 4 Name Sergeant Kalinowski Shield # _____
 Where Currently Employed Attica Correctional Facility
 Address 639 Exchange Street Attica new
York 14011

Defendant No. 5 Name Officers Caggiano & Lazzard Shield # _____
 Where Currently Employed Attica Correctional Facility
 Address 639 Exchange Street Attica new
York 14011

II. Statement of Claim:

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

A. In what institution did the events giving rise to your claim(s) occur? Attica
Correctional Facility

B. Where in the institution did the events giving rise to your claim(s) occur? C Block
25-26 Company

C. What date and approximate time did the events giving rise to your claim(s) occur? 05/05/2011
at 7:30 AM

D.

Facts:

What happened to you?

Who did what?

Was anyone else involved?

Who else saw what happened?

On 05/05/2011 at around 7:15 A.M. Officer Baggard was opening the cells for medication, but did not open my cell at that time, instead he opened my cell after the escort officers had already left the block with the other inmates at which time I was let out of my cell and called to the front of the block by officer Baggard and was told to go out into the hall way, as I began to exit the company officer J Caggich and several other officers including officer J Baggard, ran in to the exit way and began to punch and kick me, I was then placed in handcuffs and put in the hallway officer J Caggich, stated after he hit me in the head with my own cane "this is what happens to niggers that give grievance" I was then taken to S.H.U. the Sergeant for S.H.U. stated "this man is hurt and he can not come in here like that" I was then pushed over to the hospital by wheelchair and placed in to the infirmary.

III. Injuries:

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received. It was determined that I had blood on my knee, and I had surgery to remove it.

IV. Exhaustion of Administrative Remedies:

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted." Administrative remedies are also known as grievance procedures.

A. Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?

Yes ☒ No ☐

If YES, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).

Attica Correctional Facility
639 Exchange Street Attica New York

B. Does the jail, prison or other correctional facility where your claim(s) arose have a grievance procedure?

Yes ☒ No ☐ Do Not Know ☐

C. Does the grievance procedure at the jail, prison or other correctional facility where your claim(s) arose cover some or all of your claim(s)?

Yes ☒ No ☐ Do Not Know ☐

If YES, which claim(s)? im not sure

D. Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose?

Yes ☐ No ☒

If NO, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?

Yes ☐ No ☒

E. If you did file a grievance, about the events described in this complaint, where did you file the grievance?

1. Which claim(s) in this complaint did you grieve? _____

2. What was the result, if any? _____

3. What steps, if any, did you take to appeal that decision? Describe all efforts to appeal to the highest level of the grievance process. _____

F. If you did not file a grievance:

1. If there are any reasons why you did not file a grievance, state them here: The

*reason i did not file a grievance is because i was
jumped for filing other grievances, this whole
situation is about me filing grievance*

2. If you did not file a grievance but informed any officials of your claim, state who you informed, when and how, and their response, if any: *i wrote the superintendent
but he never wrote me back.*

- G. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies. *on 03/11/2011 i filed a grievance title of grievance
threatened and denied entitlements A-58104-11 and on
04/14/2011 i filed another grievance, title of grievance
retaliation by staff for filing grievance.*

Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies. *See attachments*

V. Relief:

State what you want the Court to do for you (including the amount of monetary compensation, if any, that you are seeking and the basis for such amount). *i'm seeking 250,000, for pain
and suffering excessive use of force and cruel
and unusual punishment.*

VI. Previous lawsuits:On
these
claims

- A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?

Yes ____ No ☒

- B. If your answer to A is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another sheet of paper, using the same format.)

1. Parties to the previous lawsuit:

Plaintiff _____

Defendants _____

2. Court (if federal court, name the district; if state court, name the county) _____

3. Docket or Index number _____

4. Name of Judge assigned to your case _____

5. Approximate date of filing lawsuit _____

6. Is the case still pending? Yes ____ No ____

If NO, give the approximate date of disposition _____

7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) _____

On
other
claims

- C. Have you filed other lawsuits in state or federal court otherwise relating to your imprisonment?

Yes ☒ No ____

- D. If your answer to C is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same format.)

1. Parties to the previous lawsuit:

Plaintiff Charles GittingDefendants Warden York Hughes, et al.

2. Court (if federal court, name the district; if state court, name the county) Southern District of New York

3. Docket or Index number 08 Civ 4025

4. Name of Judge assigned to your case Richard J. Sullivan

5. Approximate date of filing lawsuit not sure

6. Is the case still pending? Yes ____ No ☒

If NO, give the approximate date of disposition Can not remember

7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) there was a settlement for \$2,500

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 18 day of August, 2011.

Signature of Plaintiff

Inmate Number

Institution Address

Charles Gattling
10A0061
Attica Correctional
Facility 639 Exchange
Street Attica New
York 14011

Note: All plaintiffs named in the caption of the complaint must date and sign the complaint and provide their inmate numbers and addresses.

I declare under penalty of perjury that on this 18 day of August, 2011, I am delivering this complaint to prison authorities to be mailed to the Pro Se Office of the United States District Court for the Southern District of New York.

Signature of Plaintiff:

Charles Gattling